U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

For Official Use Only

Ε

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number 0 - ASC 5	2. Fiscal Fedi Govered From.		
	01/01/2004 Through: 12/31/2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name James A Mackiewicz	Name Operating Engineers Local 513 Labor Organization File Number \$39-895		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 582 Saale Club Drive	street 3449 Hollenberg Drive		
city West Alton	city Bridgeton		
State MO ZIP Code + 4 63386	State MO ZIP Code + 4 63044-24dd		
5. Position in labor organization. Elected to Executive Board of Local 513			
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):			
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.			
6. Name and address of Employer (including trade пате, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name			
Tendo Namo if cass			

Signature

7.b. Amount.

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information
submitted in this report (including the information can ained in any accompanying documents), has been examined by the signatory and is, to the best of the
undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed James Machaning

ZIP Code + 4

On 8/15/05

636-899-1151

Street

City

State

P.O. Box, Bidg., Room No., if any

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, salling or leasing to, or otherwise dealing with the business

ZIP Code + 4

or Consultant

?

of an employer whose employees your labor organization represents or is actively sealing to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any). (Eastern Missourl Operative Engineers) Name Local 513 Journey man Apprenticeship Training Program Trade Name, if any CE Local 513 Training P.O. Box, Bldg., Room No., if any Street 75 Hwy F City Silex State MC ZIP Code + 4 63377-2613 10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any:	c. Employer 11.a. Nature of such dealing. Multi-employer trust fund that receives contributions on behalf of Local 513 members persuant to collective bargaining		
P.O. Box, Bldg., Room No., if any	agreements.		
Street	11.b. Approximate dollar value of such dealing. 2321,669		
City	12.a. Nature of interest hald or income received.		
State ZIP Code + 4	See attached list.		
	12.b. Amount. 112,660		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			

14.b. Amount of payment.

13.b. Is the Business an Employer

Street

City

State

2004 LM-30 Reporting for James A. Mackiewicz

<u>Descripton</u>	<u>Amount</u>
1/04 Textbook for Spring 2004 College Class	46.14
2/04 Travel & Lodging for Hazmat Refresher in Cape Girardeau, MO	165.47
2/04 Registration fee for CCO Examiner Class in Philadelphia, PA	650.00
2/04 Travel & Lodging for CCO Examiner Class in Philadelphia, PA	1,336.86
4/04 Travel & Lodging for New Teacher Institute Callback Class	86.07
5/04 Registration & Niembership fee for ACTE	63.00
7/04 Travel & Lodging for ACTE in Springfield, MO	626.18
8/04 Textbook & Tuition for 2004 Fall College Class	669.00
2004 Wages & Bonuses (same as W-2)	68,962.55
2004 Fringe Benefits	40,054.57
Total for 2004 LM-30 Part 12b	112,659.84
	1/04 Textbook for Spring 2004 College Class 2/04 Travel & Lodging for Hazmat Refresher in Cape Girardeau, MO 2/04 Registration fee for CCO Examiner Class in Philadelphia, PA 2/04 Travel & Lodging for CCO Examiner Class in Philadelphia, PA 4/04 Travel & Lodging for New Teacher Institute Callback Class 5/04 Registration & Niembership fee for ACTE 7/04 Travel & Lodging for ACTE in Springfield, MO 8/04 Textbook & Tuition for 2004 Fall College Class 2004 Wages & Bonuses (same as W-2) 2004 Fringe Benefits

James is a full time instructor for OE Local 513 Training. Items 1, 5, 6, 7 and 8 were required for him to maintain his Missouri Teacher's Certificate and represent his reimbursed expenses. Item 2 is reimbursed expenses related to teaching a class in an outstate location where there were a number of people needing training. Items 3 and 4 were reimbursed expenses for James to attend a class so that he could return to our location and test students for National Crane Certification.

James' position as an officer of the Local 513 is paid to the extent that he recieves \$50.00 per meeting attended.